

DEC-08-2003 MON 02:36 PM BLAKELY SKOLOFF & TAYLOR

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Attorney's Docket No. 04676.P004X

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of:)	
Matias Duarte, et al.)	Examiner: Kumar, Srilakshmi K.
Application No.: 09/714,320)	Art Unit: 2675
Filed: November 15, 2000)	Confirmation No.: 6475
For: ADJUSTABLE DATA PROCESSING DISPLAY)	

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE

Sir:

In response to the Office Action mailed October 6, 2003, please enter the following amendments and consider the following remarks.

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09/714,320

1

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Deliver to: SriJakshini K. Kumar, USPTO

Art Group: 2675

Facsimile No.: 203-872-9314

Date: December 8, 2003

From: Thomas C. Webster, Reg. No. 46,154

Our Docket No.: 4676P004X

Number of pages 12 including this sheet.

Application No.: 09/714,320

Filing Date: 11/15/2000

Docket Due Date(s): 1/6/2004

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: Response	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (in triplicate) (____ pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: (____ pgs) w/cover & abstract	<input type="checkbox"/> Petition for:
<input type="checkbox"/> Assignment & Cover Sheet (____ pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Certificate of Mailing	<input type="checkbox"/> Reply Brief (____ pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA (____ pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: ____ sheets, ____ figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: ____	<input type="checkbox"/> Response to Written Opinion (____ pgs)
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 (____ pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
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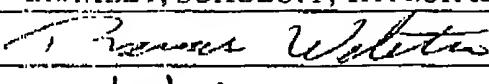
Date

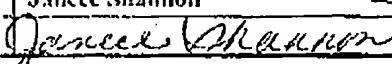
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TRANSMITTAL FORM		Application No.	09/714,320	
<i>(to be used for all correspondence after initial filing)</i>		Filing Date	November 15, 2000	
		First Named Inventor	Matias Duarte	
		Art Unit	2675	
		Examiner Name	Srilakshmi K. Kumar	
Total Number of Pages in This Submission		12	Attorney Docket Number	4676P004X

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;">Return Postcard</div>
		Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thomas C. Webster, Reg. No. 46,154 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
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Date	12/8/03

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FEE TRANSMITTAL for FY 2003		<i>Complete if Known</i>																																																																																																																													
<i>Effective 01/01/2002. Patent fees are subject to annual revision.</i>																																																																																																																															
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Application Number 09/714,320 Filing Date November 15, 2000 First Named Inventor Matias Duarte Examiner Name Srilakshmi K. Kumar Group/Art. Unit 2675 Attorney Docket No. 46761004X																																																																																																																													
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Deposit Account Number 02-2666 Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Fee Code</td> <td>Fee Code</td> <td>Fee</td> <td></td> </tr> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>0</td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> </tr> <tr> <td>2053</td> <td>130</td> <td>2053</td> <td>130</td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> </tr> <tr> <td>1805</td> <td>1,840*</td> <td>1805</td> <td>1,840*</td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55</td> </tr> <tr> <td>1252</td> <td>120</td> <td>2252</td> <td>120</td> </tr> <tr> <td>1253</td> <td>650</td> <td>2253</td> <td>475</td> </tr> <tr> <td>1254</td> <td>1,450</td> <td>2254</td> <td>740</td> </tr> <tr> <td>1255</td> <td>1,210</td> <td>2255</td> <td>615</td> </tr> <tr> <td>1404</td> <td>330</td> <td>2401</td> <td>165</td> </tr> <tr> <td>1402</td> <td>330</td> <td>2402</td> <td>165</td> </tr> <tr> <td>1403</td> <td>290</td> <td>2403</td> <td>145</td> </tr> <tr> <td>1451</td> <td>1,510</td> <td>2451</td> <td>1,510</td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>65</td> </tr> <tr> <td>1453</td> <td>1,330</td> <td>2453</td> <td>665</td> </tr> <tr> <td>1501</td> <td>1,330</td> <td>2501</td> <td>685</td> </tr> <tr> <td>1402</td> <td>400</td> <td>2502</td> <td>210</td> </tr> <tr> <td>1503</td> <td>640</td> <td>2503</td> <td>320</td> </tr> <tr> <td>1460</td> <td>130</td> <td>2460</td> <td>130</td> </tr> <tr> <td>1807</td> <td>50</td> <td>1807</td> <td>50</td> </tr> <tr> <td>1806</td> <td>180</td> <td>1808</td> <td>180</td> </tr> <tr> <td>0021</td> <td>40</td> <td>0021</td> <td>40</td> </tr> <tr> <td>1800</td> <td>770</td> <td>1800</td> <td>365</td> </tr> <tr> <td>1910</td> <td>770</td> <td>2010</td> <td>365</td> </tr> <tr> <td>1801</td> <td>770</td> <td>2801</td> <td>305</td> </tr> <tr> <td>1802</td> <td>900</td> <td>1802</td> <td>900</td> </tr> <tr> <td colspan="4" style="text-align: right; padding: 2px;">Other fee (specify) Amendment with no additional claims 0.00</td> </tr> </tbody> </table>		Large Entity	Small Entity	Fee Description	Fee Paid	Fee Code	Fee Code	Fee		1051	130	2051	0	1052	50	2052	25	2053	130	2053	130	1812	2,520	1812	2,520	1804	920*	1804	920*	1805	1,840*	1805	1,840*	1251	110	2251	55	1252	120	2252	120	1253	650	2253	475	1254	1,450	2254	740	1255	1,210	2255	615	1404	330	2401	165	1402	330	2402	165	1403	290	2403	145	1451	1,510	2451	1,510	1452	110	2452	65	1453	1,330	2453	665	1501	1,330	2501	685	1402	400	2502	210	1503	640	2503	320	1460	130	2460	130	1807	50	1807	50	1806	180	1808	180	0021	40	0021	40	1800	770	1800	365	1910	770	2010	365	1801	770	2801	305	1802	900	1802	900	Other fee (specify) Amendment with no additional claims 0.00			
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Name (Print/Type) Thomas C. Webster		Registration No. (Attorney/Agent) 46,154		Telephone (408) 720-8300																																																																																																																											
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